

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) George W. Roussos and Lindsay E. Nadeau

RECEIVED

OCT 3 1 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

II. Name of lobbyist's partnership, firm or corporation, if any:				
Orr & Reno, P.A.				
(Nam	e of partnership, firm or cor	poration)		
45 S. Main Street	, P.O. Box 3550	Concord	NH	03302
Business Address: (Str	eet)	(Town/City)	(State)	(Zip Code)
(603) 224-2381	(603)	224-2318	e-mail groussos	@orr-reno.com
(Telephone)		(Fax)		
	vers: (Choose one – file ansactions which are no		s for each client, OR you may any one client).	y file a separate report for
All reportable trans	sactions occurring in the r	months prior to th	ne reporting date relative to the	following client:
Cigna				
•	(Full Name of Client as it	appears on the Lob	byist Registration Form)	
OR	nations by the labbuist (in	soludina the labb	yist's family), or the lobbying	firm listed helow which are
unrelated to any partic	• •	icidating the 1000	yist's family, of the loodying	Timi listed below which are
IV. Date of Report	April 25, 2018 🛘		July 25, 2018 🔲	
	ty from date of registration	to 3/31/18	activity from 4/1/18 to 6/30/18	
	October 31, 2018 🗵		January 30, 2019 🗍	, a
•	activity from 7/1/18 to 9/30/	18	activity from 10/1/18 to 12/31/1	i o
			transactions made since the Secretary of State's Office, St	
VI. Check if additions	al reports are attached:			
☑ If you have receive	ed fees or made expenditu	ıres, you must fil	e Addendum A- Fees and Ex	penses
☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B— Report of Honorariums or Expense Reimbursement				
☐ If you, your firm, or your family has made political contributions, you must file Addendum C-Political Contributions				
Sworn Statement/Aff I have read RSA 15, R and complete to the be (Signature of lobbyist)	SA 15-B, RSA 14-C and st of my knowledge and t	RSA 664 and he belief.	reby swear or affirm that the form $\frac{10/31/18}{\text{(Date)}}$	
George W. Rouss	os			
(Print Name of lobbyi	st)			

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) George W. Roussos and Lindsay E. Nadea	ıu	
II. Name of lobbyist's partnership, firm or corporation, if any:		
Orr & Reno. P.A. (Name of partnership, firm or corporation)		
(Name of partnership, firm or corporation)		
III. Name of Client Cigna	Date_	10/31/18
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, governmen including research, monitoring legislation, and related legal work. The gr reduced by any expenses:	t relations,	or public relations service
a) Total of all fees received in this reporting period	a) \$	15,000.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y		29,900.00
c) Total of all fees received to date (Add lines a and b)	c) \$	44,900.00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	0.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office e individual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this repeating purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and i may be file e aggregate xpenses; (b ele: meals p ess than \$10 ed with a v orting perioue of great er than \$25 i, expense	f expenditures are made bed for the lobbyist(s)/firm total of all expenses pair total of all expenses pair total of a urchased during a busines that is given to the personalue of \$25.00 or less); and of greater than \$25.00 for than \$25, purchase of the but not greater than \$50 to the personalue of \$25, purchase of of \$25, pu
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported	a) \$	0.00
in a), of \$25 or less.	b) \$	0.00
a). Total of all itemized expenditures reported in detail in section VI.	c) \$	0.00

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$	0.00
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	100.00
f) Total of all expenses year to date	f) \$	100.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees du	ring this reporting
Paid to:	Amount:	
	\$	
	\$	
	\$	
	s	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	m that the fore	going information
is true and complete to the best of my knowledge and belief.		
Jan M/mm		_
(Signature of lobbyist)	10/31/18 (Da	
(Oignature or 1000) 131)	(24	,
George W. Roussos (Print Name of lobbyist)		
(1 THR (Maille of 1000y ist)		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Stater	nent/Aff	irmatio	n by l	Lobbyist
Statem	ent of	Income	and Ex	pense	s for:

Name of Lobbying partners	hip, firm, or corpor	ation: Orr & Reno, P.	Α
Name of Client (leave blank	if Statement is for	the partnership, firm, or	corporation and not related to any
particular client):Cigna_			
_			
Date of Report (check one).	:		
April 25, 2018 □ Ju	ly 25, 2018 🗆	October 31, 2018 🖾	January 30, 2019 □
			nd Expenses described above, and umber of Addendum forms being
_1 Addendum A(s).			
Addendum B(s).			
Addendum C(s).			
complete to the best of my k		ef.	nt and each Addendum is true and 10/31/18 (Date)
George W. Roussos			